

Order ID 92005

92005

Page 1

October-19-12 1:18:13 PM

Item ID: 647.1711

Accept

N9000040100

Setup Start *NS1*

Revision ID:

Item Name: Plate

Stop *NS2*

Start Date: 19/10/2012 Start Qty: 2.00

2

Cust Item ID:

Required Date: 02/11/2012 Req'd Qty: 2.00

2

Customer:

Reference:

Approvals: Process Plan: MLJ Date: 12-10-19 Tooling:

Date:

Run Start *NR1*

QC: Date: SPC (Y/N):

Date:

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr

Revision Nbr

647.1700

N/C

110

0.00

110

Waterjet

Memo

0.00

FLOW CNC Waterjet

1-Cut as per Dwg

Dwg Rev: N/C

Prog Rev: N/C

7675.160

2-Deburr if necessary

2 0 Jm 12-12-5

120

QC2- Inspect parts off machine FAI/FAIB

0.00

120

QC

Memo

0.00

Quality Control

2 0 Jm 12-12-5

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Order ID 92005

92005

Page 2

October-19-12 1:18:13 PM

Item ID: 647.1711

Accept

N9000040100

Setup Start

NS1

Revision ID:

Stop

NS2

Item Name: Plate

Start Date: 19/10/2012 Start Qty: 2.00

2

Cust Item ID:

Required Date: 02/11/2012 Req'd Qty: 2.00

2

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

130

QC8- Inspect parts - second check

0.00

130

QC

Memo

0.00

Quality Control

DAS
15
12/12/05

2

140

Form as per dwg

0.00

140

Brake NC

Memo

0.00

Brake NC

2

8
13/01/18

150

QC5- Inspect part completeness to step on W/O

0.00

150

QC

Memo

0.00

Quality Control

SM
13.1.18

2

151

Outsource
as per dwg

Anodize

issue p/o: 19012

13/02/04 (2)

152

Packaging

Receive + inspect

43/2/14 (2)

AS

12.12.05

153

154

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <table style="width:100%; font-size: small;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>						Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>																								
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>																								
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Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																									
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector																		
Doc/Data																											
Equip/Tooling																											
Operator																											
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Process																											
Supplier																											
Training																											
Unapproved																											

FAULT CATEGORY									
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other						

Work Order ID 92005

Friday, March 22, 2013 9:13:40 AM

92005

Page 3

Item ID: 647.1711

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Plate

Start Date: 10/19/2012 Start Qty: 2.00

2

Cust Item ID:

Required Date: 11/2/2012 Req'd Qty: 2.00

2

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start *NR1*

QC:

Date:

SPC (Y/N):

Date:

Stop *NR2*

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

150 153

QC5- Inspect part completeness to step on W/O

0.00

DAS
16
9-3-13

13/03/23

153

QC

Memo

0.00

Quality Control

155

0.00

155

SprayPaint

Memo

0.00

2

Ø

Ø

AJ

13-3-22

Spray Painting

PRIME IAW MIL-P-23377J TYPE I CLASS N AS PER DWG. (SEE NOTE 3)

CARDINAL 4860-50 PRIMER BATCH: 124204

156

QC14- Inspect Spray Paint

0.00

156

QC

Memo

0.00

Quality Control

DAS
16
9-3-13

13/03/23

Work Order ID 92005

92005

Page 3

October-19-12 1:18:13 PM

Item ID: 647.1711

Accept

N900040100

Setup Start *NS1*

Revision ID:

Item Name: Plate

Stop *NS2*

Start Date: 19/10/2012 Start Qty: 2.00

2

Cust Item ID:

Required Date: 02/11/2012 Req'd Qty: 2.00

2

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start *NR1*

QC:

Date:

SPC (Y/N):

Date:

Stop *NR2*

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

160

Identify as per dwg & Stock Location: MF

0.00

160

Packaging

Memo

0.00

Packaging

IDENTIFY AS PER APICAL MPP-120 BY STAMPING P# AND REV

Shipped to Apical

13-03-28

170

QC21- Final Inspection - Work Order Release

0.00

170

QC

Memo

0.00

Quality Control

13/3/28

MCJ 13-03-28

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Print

October-19-12 1:18:17 PM

Page 1

Work Order ID: 92005

92005

Parent Item: 647.1711

647 1711

Parent Item Name: Plate

Start Date: 19/10/2012

Required Date: 02/11/2012

Start Qty: 2.00

Required Qty: 2.00

Comments: IPP REV:A 12.10.05 NEW ISSUE DD VERF:JFS

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
---------------------------------	------------------------	---------------	-------------	---------------------	------------------	-----------------	--------------------	----------------	-------------	--------------	---------------	----------------	--------

M7075T6S.160

Purchased

No

110

sf

0.0000

1.096

2307368

M7075T6S 160

**

2.4

7075-T6 Sheet .160

Jm 12-12-5

123644

123644

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;"> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </td> <td style="width: 33%;"> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </td> <td style="width: 33%;"> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </td> <td style="width: 33%;"> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </td> </tr> </table>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>
Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>			

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
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<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

FIRST ARTICLE INSPECTION CHECKLIST

Measured by: <i>Jm</i>	Audited by: <i>DA</i> <i>15</i>	Preliminary Approval:
Date: <i>12-12-5</i>	Date: <i>12-12-89</i>	Date:

APICAL
INDUSTRIES, INC.

ENGINEERING CHANGE NOTICE NO.		02937		SHEET 1 OF 1	
DWG NO. 647.1700	REV: NC	PREPARED BY J. JACKSON	DATE: 07/14/10	EFFECT ON DWG <input type="checkbox"/> INC. <input checked="" type="checkbox"/> UNINC.	
DWG TITLE: SKID DEFLECTOR ASSY					
APPROVED BY: ENGR <i>[Signature]</i>	MFG <i>[Signature]</i>	DR <i>[Signature]</i>	EFF: CURRENT ORDER		
REASON: REVISED F/N 8 AND NOTE 3. ADDED INSPECTION DIMENSIONS TO DRAWING VIEWS.					

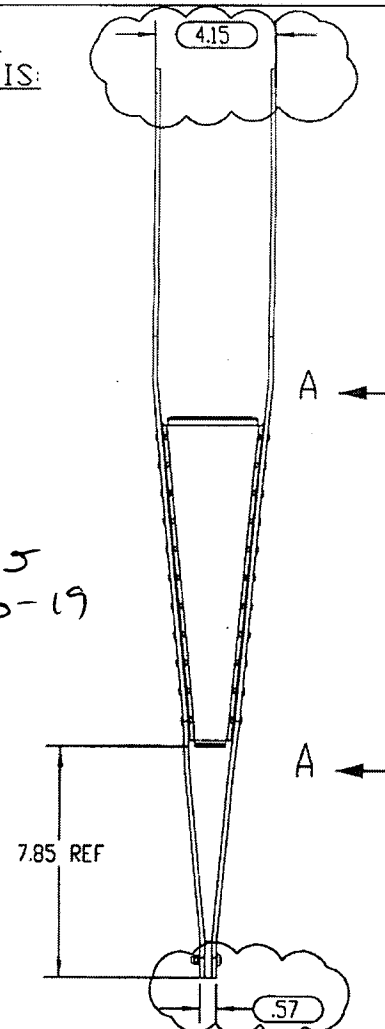
SHEET 1, ZONE A1 IS:

3 FINISH: HARD ANODIZE IAW MIL-A-8625 TYPE II CLASS 2, COLOR BLACK;
PRETREAT PRC-DESOTO PR-148 ADHESION PROMOTER, COLOR BLUE;
PRIME IAW MIL-P-23377J TYPE I CLASS N

SHEET 2,
ZONE A1 IS:

SEND COPY
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AMENDMENT
WITHOUT NOTICE
WORK ORDER

92005 MLS
12-10-19



8	R	601.1622	1	SCREW	MS27039-1-14 /
F/N	TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL/SPECIFICATION
DOCUMENTS EFFECTED:					DER REVIEW REQUIRED
<input type="checkbox"/> MDL <input type="checkbox"/> INSTALL INSTRU <input type="checkbox"/> FMS <input type="checkbox"/> ICA <input checked="" type="checkbox"/> BOM					<input type="checkbox"/> MAJOR <input checked="" type="checkbox"/> MINOR

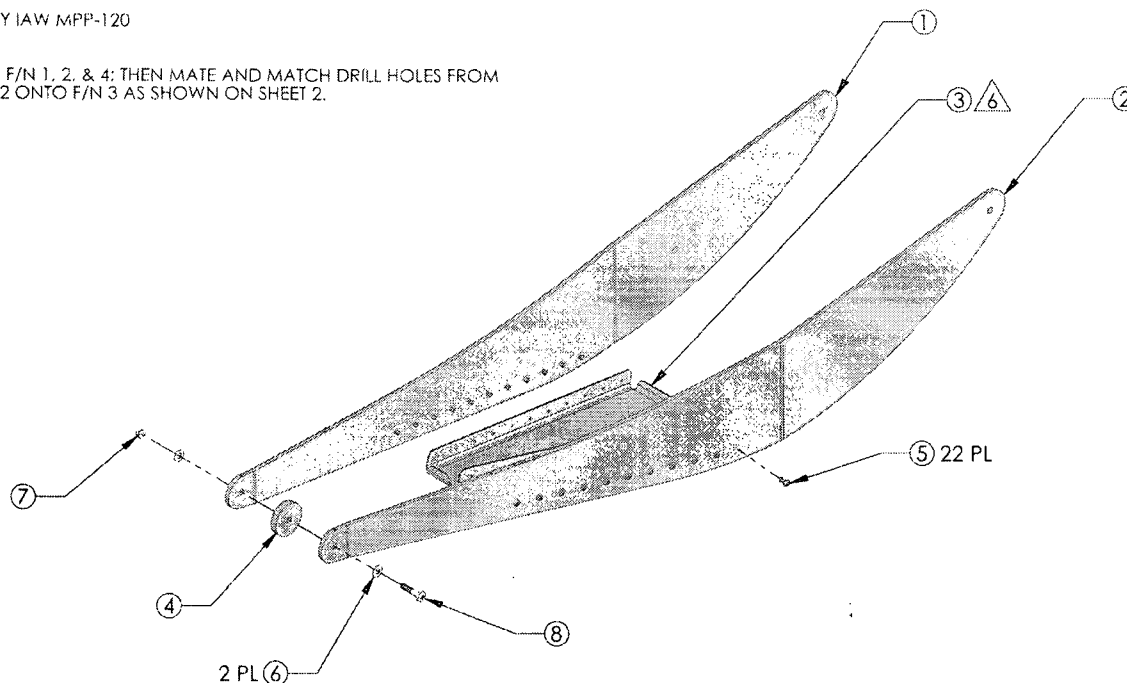
92005

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REV	DESCRIPTION	DATE	BY
1	ISSUED FOR PRODUCTION		
2	ISSUED FOR PRODUCTION		

NOTES:

- 1 MATERIAL: 7075-T6 ALUMINUM PER AMS-QQ-A-250/12
- 2 MATERIAL: 6061-T6 ALUMINUM BAR IAW AMS-QQ-A-250/11
- 3 FINISH: HARD ANODIZE IAW MIL-A-8625 TYPE III CLASS 2.
COLOR BLACK: CARDINAL 4860-50 PRETREATMENT PRIMER:
PRIME IAW MIL-P-23377J TYPE I CLASS N
- 4 DEBURR AND BREAK ALL SHARP EDGES
- 5 IDENTIFY IAW MPP-120
- 6 CLAMP F/N 1, 2, & 4; THEN MATE AND MATCH DRILL HOLES FROM F/N 1 & 2 ONTO F/N 3 AS SHOWN ON SHEET 2.



UNINCORPORATED ECN(s)

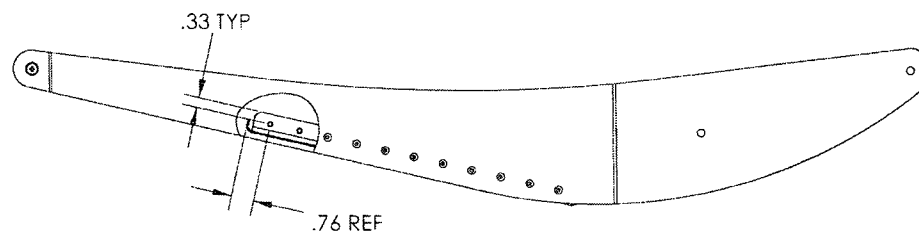
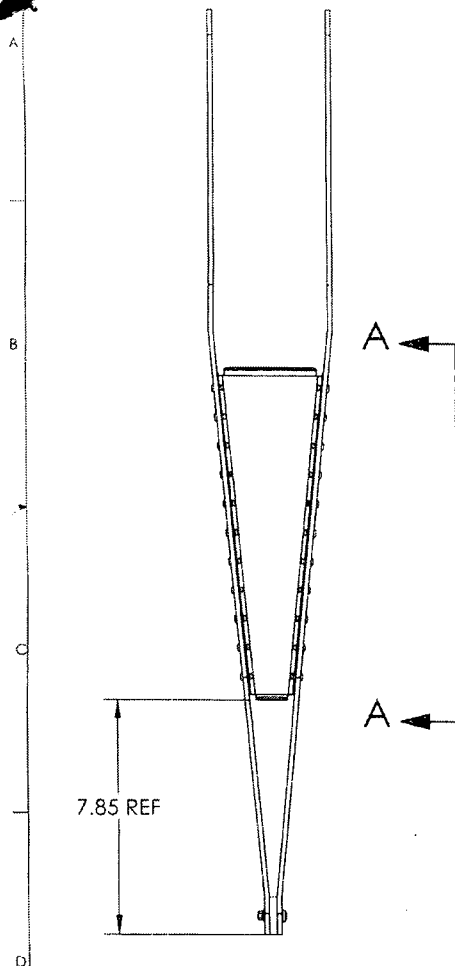
02937

	1	8	601.2637	SCREW	MS27039-1-13	
	1	7	601.2943	LOCKNUT	MS21042-3	
	2	6	601.1607	WASHER	MS114P0332P	
	22	5	601.1915	RIVET	CR3213-4-4	
	1	4	647.1713	SPACER		△
	1	3	647.1712	GUSSET		△
	1	2	647.1711	PLATE		△
	1	1	647.1710	PLATE		△
			647.1701	SKID DEFLECTOR ASSY		
	1701	FIND #	PART #	DESCRIPTION	MAT'L	SPEC.
QTY						
PARTS LIST						
NEXT ASSY (S)						
647.1300						
APICAL INDUSTRIES						
2508 TEMPLE HEIGHTS DR.						
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ALL DIMENSIONS GIVEN ARE IN INCHES UNLESS OTHERWISE SPECIFIED
 APICAL INDUSTRIES AND REPRODUCTION IN PART OR WHOLE WITHOUT
 THE WRITTEN PERMISSION OF APICAL INDUSTRIES IS PROHIBITED

REV	DESCRIPTION	DATE	APPROVED

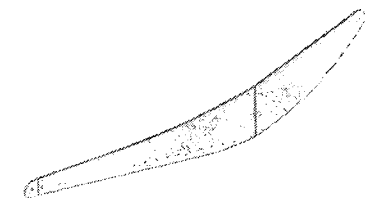
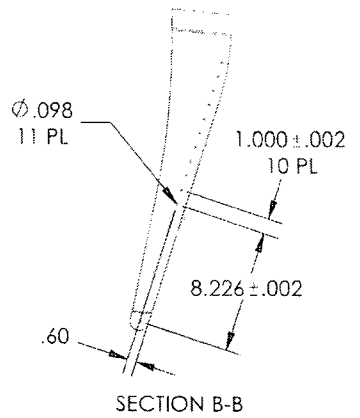
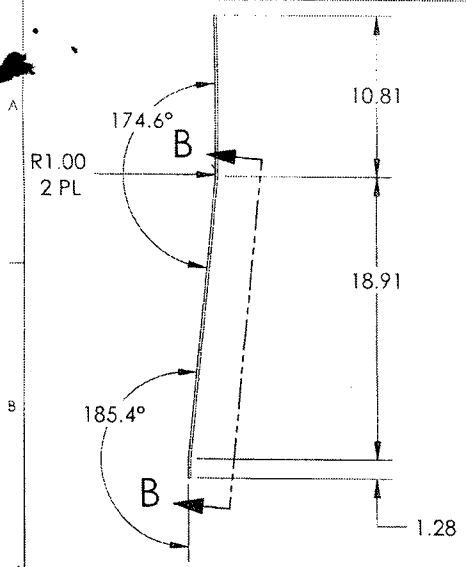


SECTION A-A

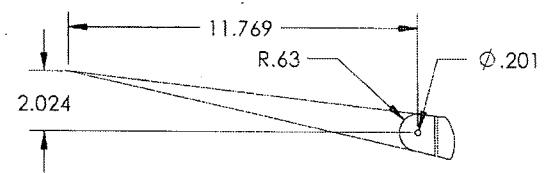
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UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 3 PLACE DECIMALS ± .01 2 PLACE DECIMALS ± .005 ANGLES ± .5°		SCALE: NONE	SHEET 2 OF 5
REV	CAGE CODE	DWG. NO.	REV
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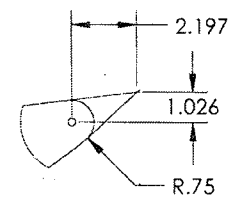
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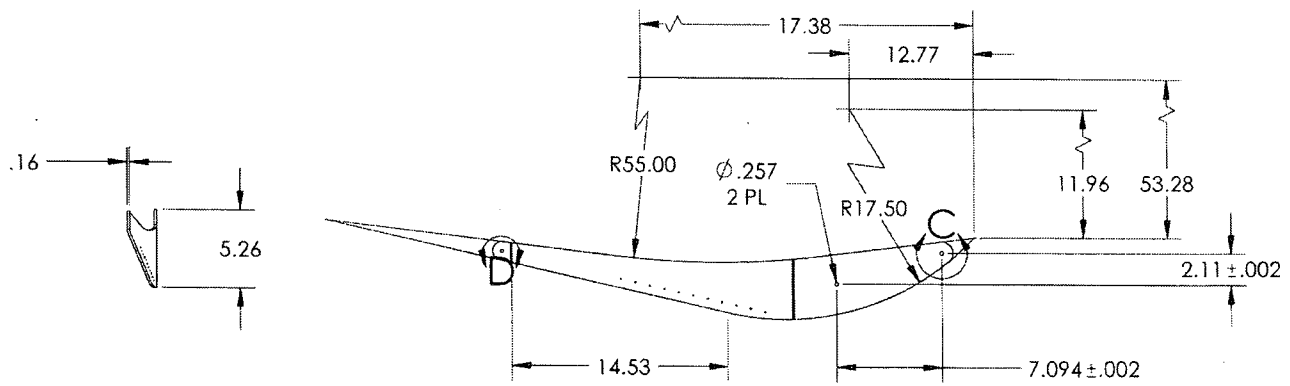
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DETAIL D



DETAIL C

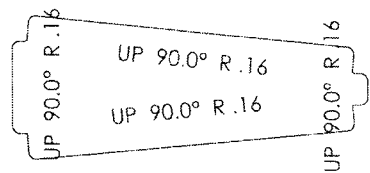
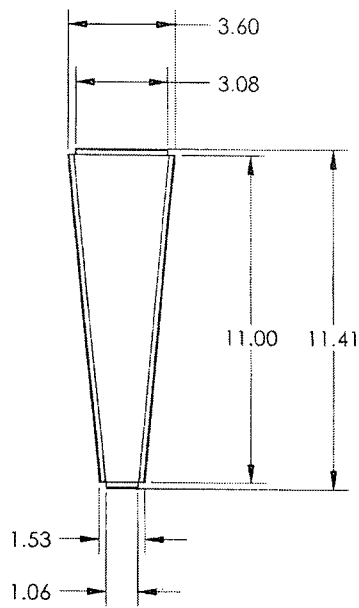


APICAL INDUSTRIES	
2608 TEMPLE HEIGHTS DR.	
OCEANSIDE, CA. 92056-3512 (760) 724-5300	
SKID DEFLECTOR ASSY	
DESIGNED BY: J. B. BAYO	DATE: 07/1/26
DRAWN BY: J. B. BAYO	DATE: 07/1/26
CHECKED BY: J. B. BAYO	DATE: 07/1/26
APPROVED BY: J. B. BAYO	DATE: 07/1/26
SCALE: NONE	SHEET: 3 OF 5

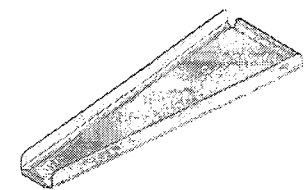
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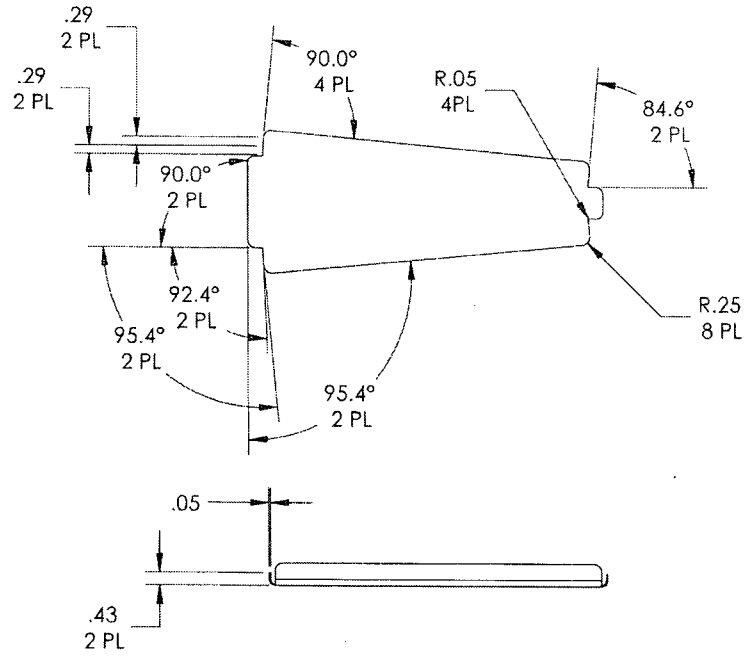
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FLAT PATTERN



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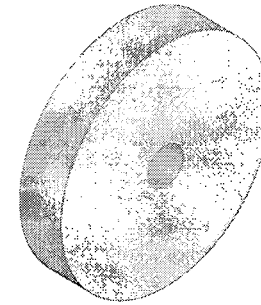
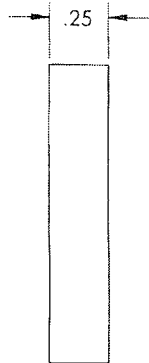


ORIGINAL DATE 8/20/05	APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760) 724-5300		
DRAWN BY E. BRAY	SKID DEFLECTOR ASSY		
CHECKED BY E. BRAY	REV N/C	DATE 8/20/05	REV N/C
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE 2 PLACE DECIMALS ±.01 ANGLES DECIMALS ±.05°	SCALE NONE	SHEET 4 OF 5	

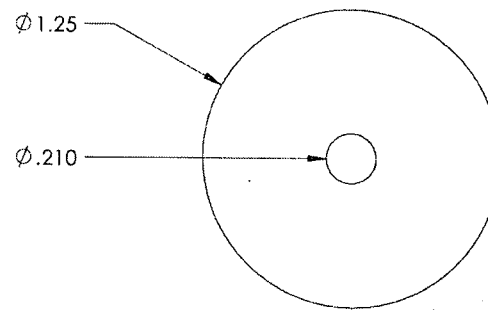
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REV	DESCRIPTION	DATE	BY	APP'D
1	ISSUE FOR MFG			



647.1713



ORIGINAL DATE DATE/REV: 08/04/05 QUANTITY: 1000000 DRAWING APPROVAL: P. BRAVO CONTRACT NO.:		APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760) 724-5300	
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: FRACTIONS DECIMALS ±.01 ANGLES ±.5°		SIZE: B CAGE CODE: 07M126 ORG. NO.: 647.1700 SCALE: NONE	REV: N/C SHEET: 5 OF 5



A.T.G. Industries Inc.
731, rue Industrielle Rd.
PLATING DEPARTMENT
Rockland, On K4K 1T2
Canada
Ph: (613) 446-4544
Fax: (613) 446-4556

Pack List

Number: 62213

Date: 13-Feb-13

To

DART AEROSPACE LTD
1270 ABERDEEN ST.
HAWKESBURY, ON K6A 1K7
Canada

Ship To


DART AEROSPACE LTD
1270 ABERDEEN ST.
HAWKESBURY, ON K6A 1K7
Canada

Ph: 613-632-5200

Fax: 613-632-1185

Ph: 613-632-5200

Fax: 613-632-1185

Terms		Ship Via	
Quantity	Description	Rev:	
1 lot	Part: ASST		
	5 PCS D3299-1		
	12 PCS D3299-5		
	8 PCS D3299-7		
	16 PCS 647.1710		
	4 PCS 647.1711	513/03/25	
	5 PCS 647.1913		
	10 PCS 647.1913		
	9 PCS 647.1915		
	12 PCS 646.3610		
	HARD ANODIZE BLACK		
	MIL-A-8625 TYPE III CLASS 2		
	32 PCS 647.2511	30	
	PASSIVATE PER QQ-P-35		
	Job: 20130091	PO: PO19017	Line:
Certificate of Conformance			
A.T.G. Industries certifies that all items in this shipment are in conformance with all requirements, specifications and drawings referenced in the purchase order.			
ISO 9001 : 2008 REGISTERED ATG SALES-2010 TERMS APPLY			
DATE : 13/2/13			
CERTIFIED SIGNATURE : 			
RECEIVER SIGNATURE : _____			